DISCLOSURE SUMMARY PAGE

FORM

DISCLOSURE

DISCLOSURE SUMMARY PAGE	A ETHICS AND	(Rev. 01/98) REPORT
DISCLOSURE SUMMARY PAGE	THAIGH DISCLOSURE BE	For Office Use Only
COMMITTEE NAME (Must be same as on Statement of Organ	MAFC 22 AM O. O.	Comm. #
CALHOUN COUNTY DEMOCRATIC CENTRAL CO	Indexed	
IMPORTANT: Indicate type of committee you are reporting for: 7	Audited	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Cent (8) Support State of Candidates	County/Local Candidate ral Committee	Computer
Martin Maria la		- light
SIGNATURE OF TREASURER (or person filing this report)	712-297-8746 TELEPHONE	
Routine Penalties Due For Late Fi	led Panorts Pango fro	m \$20 to \$200
	_	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FO	DLLOWING SENTENCE:	
I AM FILING A October 15-December 31 R		TION /(2)NON-ELECTION YEAR.
CHECK IF AMENDMENT TO REPORT DATED		ocal Committees, enter Date of Election
Check if this is final (termination) report and attach Notice of Dissolution (You must continue to file reports until a Notice of Dissolution)		ounty & Local Committees, enter County in hich Election is held
CASH ON HAND at the beginning of the reporting period. (This is of all monies held by the committee. This amount MUST same as the cash on hand at the end of the last reporting	Γ be the g period,	2 141 01
or must be zero if this is first report filed.)		2,141.01
Schedule A: Cash Contributions total (Attach Schedule	41	641.72
Schedule F: Loans Received total (Attach Schedule F).	•	
Schedule H: Total Sales of Campaign Property (Attach		
(Schedule H applies to Candidates' Commit		
		AL\$ 2,783.53
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B)		249.50
Schedule F: Loan Repayments total (Attach Schedule F		
CASH ON HAND at the end of this reporting period (if final reporting be zero) (Attach DR-3)	, balance must	\$ 2,534.03
LINDAID BILLS (From Schodule D. Angel Oct. 11 D)	·	
UNPAID BILLS (From Schedule D - Attach Schedule D)		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule		
OUTSTANDING LOANS (From Schedule F - Attach Schedule F	·	\$ <u> </u>
CANDIDATE COMMITTEES ONLY:		•
CONSULTANT BREAKDOWN (Schedule G Attached?)		VES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)					_
CALHOUN	COUNTY	DEMOCRATIC	CENTRAL	COMMITTEE	

SCHEDULE A (Rev. 02/96)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED
1/7/08	ID# CK#	Unitemized donations for OBAMA buttons		\$ 29.00
11/26/08	ID#	Lynne Gentry Campaign for State	Rep.	612.72
	CK#	2087 235th St., Rockwell City Disbursements of funds		
	ID#			
	CK#			
	iD#			
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			SUB-TOTAL	\$641.72
		TOTAL (if last page	e of this schedule)	\$ 641.72

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES	
CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization)

CALHOUN COUNTY DEMOCRATIC CENTRAL COMMITTEE

CADIIO		EMOCRATIC CENTRAL COMMITTEE	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM PURPOSE EXPENDITURE (DESCRIBE TRANSACTION) (Disbursement) WAS MADE	AMOUNT EXPENDED
11/3/08	ID# CK#	Calhoun County Reminder Election ad 515 4th St. Rockwell City, IA	\$ 30.00
11/3/08	ID# CK#	Mid-American Publishing Election ad PO Box 29, Hampton	31.50
11/3/08	ID# CK#	Journal-Herald Box 40, Manson Election ad	27.00
12/9/08	ID# CK#	MidIowa Insurance 110 N. Illinois St. Lake City, IA General liability coverage	161.00
	ID# CK#		
	ID#		
	CK# ID#		
	CK#		
·	ID# CK#		
		SUB-TOTAL	\$249.50
		TOTAL (if last page of this schedule)	\$240 50

TOTAL (if last page of this schedule)

\$249.50

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

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